Change in Company's premium or rate level produced by rate Revision effective **December 1**, 2008

	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability		
	Private Passenger		
	Commercial	6,553,663	+3.2%
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial	2,757,328	-0.3%
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity	· _	
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
Does No.	filing only apply to certain territory (t This filing impacts all territories an	erritories) or certain classes? If d classes of business.	so, specify:
We a	description of filing. (If filing follows are adopting a few ISO Illinois States. Relative to the adoption of these eption Pages to the current ISO adoaining to specific classes of business current book of business.	te Rule Notices, along with the ISO revisions, we are also filin ptions, which take exception to	October, 2008 ISO Loss g a number of Company o several ISO loss costs

^{*} Adjusted to reflect all prior rate changes.
** Change in Company's premium level which will result from application of new rates.

(Change in Company's premium or rate	level produced by rate revision effect	tive 12/1/08 for New and Renewal Business
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability		
	Private Passenger		14.00/
_	Commercial	\$4,186	-14.0%
2.	Automobile Physical Damage		
	Private Passenger		1.70/
_	Commercial	\$3,459	-1.7%
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		100-100
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
Brief of The a	description of filing. (If filing follows above captioned company hereby places and Rules.	rates of an advisory organization, spe	cify organization):
	s und Tealoo.		
** C	djusted to reflect all prior rate changes hange in Company's premium level wh sult from application of new rates.	nich will	Name American Allisana Inc.
			Great American Alliance Insurance Company
		_	Name of Company
			ennifer Stadtmiller, State Filing Cechnician Official - Title

(Change in Company's premium or rate	level produced by rate revision effect	ive 12/1/08 for New and Renewal Business
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	Change $(+ \text{ or } -)^{**}$
1.	Automobile Liability		
	Private Passenger	00.51.100	C 40/
_	Commercial	\$351,400	-6.4%
2.	Automobile Physical Damage		
	Private Passenger	602.711	12.9%
•	Commercial	\$82,711	12.970
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8. 9.	Boiler and Machinery Fire		
	Extended Coverage		
10. 11.	Inland Marine		
11. 12.	Homeowners		
13.	Commercial Multi-Peril		
13. 14.	Crop Hail		
15.	Other		
15.	Line of Insurance		
Brief of The a	description of filing. (If filing follows above captioned company hereby places and Rules.	rates of an advisory organization, spec	cify organization):
Costs	s and Rules.		
** C	djusted to reflect all prior rate changes hange in Company's premium level wh sult from application of new rates.		
			reat American Assurance ompany
			Name of Company
			rumo or company
			ennifer Stadtmiller, State Filing echnician
			Official - Title

(Change in Company's premium or rate	level produced by rate revision effect	tive 12/1/08 for New and Renewal Business
	(1)	(2) Annual Premium	(3) Percent
	<u>Coverage</u>	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability		
	Private Passenger		5.40/
_	Commercial	\$249,348	-5.4%
2.	Automobile Physical Damage		
	Private Passenger	000 740	12 00/
	Commercial	\$33,742	13.8%
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
Brief of The a	lescription of filing. (If filing follows above captioned company hereby places and Rules.	rates of an advisory organization, spe	cify organization):

** Cl	djusted to reflect all prior rate changes. nange in Company's premium level wh sult from application of new rates.		
			reat American Insurance
			Name of Company
			ennifer Stadtmiller, State Filing echnician
			Official - Title

(Change in Company's premium or rate	level produced by rate revision effective	12/1/08 for New and Renewal Business
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability Private Passenger		
	Commercial	\$31,444	-8.2%
2.	Automobile Physical Damage Private Passenger		
	Commercial	\$6,352	8.5%
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
Does f	iling only apply to certain territory (te	rritories) or certain classes? If so, specify:	
No		micorios) or corram classes. In se, speed,	
Brief o	description of filing. (If filing follows	rates of an advisory organization, specify of	organization):
		es on file their intent to adopt ISO's revised	l Commercial Automobile Loss
Cost	s and Rules.		
			· -
	djusted to reflect all prior rate changes		
** C	hange in Company's premium level w	nich will	
re	sult from application of new rates.		

Great American Insurance Company of New York

Name of Company

Jennifer Stadtmiller, State Filing
Technician
Official - Title

ILLINOIS SUMMARY SHEET FORM RF-3

Cha	nge in Company's premium or rate level produced by	rate revision effective 09-15-08	
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	Change (+ or -)**
1.	Automobile Liability		
	Private Passenger		
	Commercial	27,320,369	-0.1%
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial	10,208,601	+1.0%
3.	Liability Other than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Workers Compensation		
	-		
16.	Other Line of Insurance		
	Line of mourance		•
Doe	s filing only apply to certain territory (territories) or cer	rtain classes? If so, specify <u>No</u>	
Brie	f description of filing (if filing follows rates of an adviso	ory organization, specify organization	on) Independent
Con	nmercial Auto manual rate revision - physical damage	base rates are decreasing and base	se deductible for
spe	cified perils coverage is changing to actual cash value	e (ACV).	
*	Adjusted to reflect all prior rate changes.	-	
**	change in Company's premium level which will resul	t from application of new rates	
	Change in Company's premium level which will resul	t nom application of new rates.	
		Great West Casualty Co	ompany
	_	Name of Com	
			05 450
		Karen H. Hanna, A	
	_	Research and Complia Official - Tit	

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

(1)	(2)	(3)
	Annual Premium	Percent
Coverage	Volume (Illinois) *	Change (+or-) **
Automobile Liability Private Passenger	\$108,445	0
Commercial	NIA	N/A
Automobile Physical Damag Private Passenger	\$584,541	3.5%
Commercial	NIA	NIA ·
Liability Other Than Auto	#19.044	0
Burglary and Theft	0	0
Glass	0	0
Fidelity	0	0
Surety	0	0
Boiler and Machinery	0	0
Fire	Ö	Ŏ
Extended Coverage	. 0	0
Inland Marine	0	0
Homeowners	0	0
Commercial Multi-Peril	0	0
Crop Hail	Ö	0
Other	ð	0
Life of Insurance		
Does filing only apply to certain Classes? If so, specify:	n territory (territories) or o	certain RV
Brief description of filing. (If filing Organization, specify organization): + 10 % : (This filing amen	lvisory ads current rates
*Adjusted to reflect all prior rate **Change in Company's premi		from application of ne
rates.	At .	
-	National Inte	rstate Company
-	National Inter	rstate Company ne of Company
-	National Inter Will Morrison -	rstate Company ne of Company - Product Analyst fficial - Title

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 10/1/2008

Change in Company's premium or fate level produced by fate revision enective 10/1/2008				
	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)</u> *	(3) Percent <u>Change (+ or -)**</u>	
11. 12. 13. 14.	Automobile Liability Private Passenger Commercial Automobile Physical Damage Private Passenger Commercial Liability Other Than Auto Burglary and Theft Glass Fidelity Surety Boiler and Machinery Fire Extended Coverage Inland Marine Homeowners Commercial Multi-Peril Crop Hail Other	1,327,110	-9.30%	
Doe	Line of Insurance	territories) or certain classes? If so, specify:	No, we are adopting revised	
Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adopting ISO Automobile Loss Costs, Ref. # CA-2008-BRLA1, eff. 10/1/2008. The changes indicated above are based on a weighted average of the business currently written in our Company for the state of Illinois.				
	*Adjusted to reflect all prior rate changes. **Change in Company's premium level which will result from application of new rates.			
		Riverport Insurance Company Ne	ame of Company	
		Terri Zachman, Product Deve		



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JUL - 3 2008

IDFPR (MPC)
DIVISION OF INSURANCE

Change in Company's premium or rate level produced by rate Revision effective 07/01/2008 New Business and 09/15/2008 Renewals

	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois) *	Change (+ or -)**
	<u> </u>	v oramo (minoro)	
1.	Automobile Liability		
	Private Passenger		
	Commercial	\$1, 206,840	-1.3%
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial	\$817,554	-1.3%
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Commercial Umbrella		
	Line of Insurance		
Does	filing only apply to certain territory (te	rritories) or certain classe	s? If so, specify:
	No.	<u> </u>	

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Rates and rules are revised. Private passenger types will now be rated according to Commercial Auto rather than Personal Auto rules. Schedule rating plan is revised to +/- 40% for management characteristics.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

Rockford Mutual Insurance Company
Name of Company

James D. Robbins,

<u>Manager of Research and Development</u>

Official - Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or ra	te level produced by rate revision
effective 07/08/2008	•

(1)	(2) Annual Premium	(3) Percent
Coverage	- Volume (Illinois) *	_ Change (+or-) **
Automobile Liability Priv	ate	
Passenger		
Commercial	710855	0.00%
Automobile Physical Dai	mag	
Private Passenger		•
Commercial	145187	-6.51%
Liability Other Than Auto	0	
Burglary and Theft		
Glass		
Fidelity		
Surety		
Boiler and Machinery		
Fire		
Extended Coverage		
Inland Marine		
Homeowners		
Commercial Multi-Peril		
Crop Hail		
Other	***************************************	
Life of Insurance)	
Does filing only apply to Classes? If so,	certain territory (territories) o	r certain
specify: N	No .	
, ,	g. (If filing follows rates of an a	advisory
Organization, specify	B	d the common different to the control of
organization):	Revising page IL-G-7, an	d the commodity tables on pages
MTC-6 through MTC-10.		
*Adjusted to reflect all p **Change in Company's rates.	rior rate changes. s premium level which will resu	ult from application of new
	Sagamore Insurai	nce Company
		ame of Company
•		Compliance Analyst

Official - Title

	Change in Company's premium or ra	te level produced by rate revision effective	10/1/2007
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability		
	Private Passenger Commercial	5,358,363	0.1%
2.	Automobile Physical Damage	3,336,303	0.176
2.	Private Passenger		
	Commercial	1,486,278	0.1%
3.	Liability Other Than Auto	8,000,807	1.1%
4.	Burglary and Theft	0,000,007	111/0
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	5,532,707	0.5%
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
Does :		erritories) or certain classes? If so, specify:	
Revi		s rates of an advisory organization, specify or or Commercial Auto, Commercial Property	

- * Adjusted to reflect all prior rate changes.
- ** Change in Company's premium level which will result from application of new rates.

DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR

JUL 14 2008

SPRINGFIELD, ILLINOIS

Selective Insurance Company of South Carolina (SICSC)

Name of Company

Tracy Potter – State Filing Specialist

Official - Title

H29219D

	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability Private Passenger		
	Commercial	1,143,997	0.0%
2.	Automobile Physical Damage Private Passenger		
	Commercial	312,468	0.0%
3.	Liability Other Than Auto	1,584,817	0.2%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	587,993	1.7%
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
	iling only apply to certain territory (t	erritories) or certain classes? If so, specify:	
N/A			
rief d	lescription of filing. (If filing follow	s rates of an advisory organization, specify of	organization):
		or Commercial Auto, Commercial Property	
	siness written under SICSC.		

- * Adjusted to reflect all prior rate changes.
- ** Change in Company's premium level which will result from application of new rates.



Selective Insurance Company of the Southeast (SICSE)

Name of Company

Tracy Potter – State Filing Specialist

Official - Title

	(1)		
		(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	Change $(+ \text{ or } -)^{**}$
1.	Automobile Liability		
	Private Passenger Commercial	\$474,561	-6.8%
2.	Automobile Physical Damage Private Passenger	Ψ171,301	0.070
	Commercial	\$121,682	-6.8%
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass	-	
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
Does fi No.	ling only apply to certain territory (t	erritories) or certain classes? If so, specif	ŷ:
Rating	Organization: Insurance Services Or		y organization):
CA-200	08-BRLA1, Illinois Commercial Au	to Advisory Prospective Loss Costs	

- * Adjusted to reflect all prior rate changes.
 ** Change in Company's premium level which will result from application of new rates.

SUA Insurance Company Name of Company

Senior Counsel – Compliance Manager
Official - Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

Change in Company's premium or rate level produced by rate revision	on
effective 10/1 / 2008	

(1)	(2)	(3)		
	Annual Premium	Percent		
Coverage	 Volume (Illinois) * 	Change (+or-) **		
Automobile Liability Private	# . 2 . 2 . 2			
Passenger	\$13,393	0		
Commercial	NIA	NIA		
Automobile Physical Damag	<i>A</i> 1 - 11	2 ~ 0/		
Private Passenger	\$67, 164	3.7%		
Commercial	N/A	NIA		
Liability Other Than Auto	\$1,561	0		
Burglary and Theft	0	D		
Glass	0	0		
Fidelity	0	0		
Surety	0	0		
Boiler and Machinery	0	0		
Fire	0	. 0		
Extended Coverage	0	0		
Inland Marine	0	0		
Homeowners	0	0		
Commercial Multi-Peril	0	0		
Crop Hail	0	0		
Other	0	Ø		
Life of Insurance				
Does filing only apply to certa	oin territory (territories) or (rentain		
Classes? If so	an terniory (terniories) or t	A C		
specify:		RV		
specify.				
Brief description of filing. (If filing follows rates of an advisory				
Organization specify				
organization): +10% in collision, as we	This filing among	Is current rates by		
+10% in Collicion as we	Il as rule changes			
*Adjusted to reflect all prior rate changes.				
**Change in Company's prem		from application of new		
rates.				
	Triumphe C	welty longuny ne of Company Product Analyst fficial - Title		
•	Nam	e of Company		
	Will Morrison	Product Analyst		
		C Tu		